/01/2000 16:46 5045	275926	LAWEEKLY		PAGE 8
COVERING JULY I THROUGH DECEMBER 31			1 hpy or 185 str	dign lyund
Print in ink or type.	Instructions		FOR OFFICE Postmark Date	3.1 . CX
Fill in Registration Number Complete form and return to Suite 200, Buton Rouge, L. This form must be delivere This form may be fixed to g on the day of fax fransvoltes	: the Hoard of Exhics, \$40) (1 5 70809 - (225) \$22-1400. d or postmerked by the dur 225) \$22-1414. The ortobal	. d.,	100034	ri)
). Name DE 016	Berte	1 3	Ki Daug	3. Veddy
2. Business Address 2	32 Revoluto.	St Ste 4/3	N.O. LA 7	01/2 Zip
3. Business Phone 504	2 FENOLOLO S- 524 5563 Area Code and Telephone No	+ Ste 413 N	0.LA 701B	
4. Total of all expenditures (loclude expenditures from Selv	made January 1 through	June 30: \$	0.00	
 Total of all expenditures (When Applicable) (ma 	made July I through De last expenditures from Schedule	econibor 31: \$	0.00	-
6. Total of all expenditures (Line 4 added with Line 3 should	made during calendar ye I cqual Line ()	:ár: \$ _	0.00	_

7. Did you make an expenditure exceeding \$50 on one occasion for any one legislator:

From January 1 through June 30? From July 1 through December 31? □ Yes □ Yes

□ NA

If the answer to either question in Number 7 above is YES, please complete Schedule A and attach.

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LA ETHICS ADMIN

LOBBYING EXPENDITURE REPORT

8.	. Did you make expenditures exceeding the sum of \$250 for any one legislator:						
	From January I through June 30?						
	If the answer to either question in Number 8 above is YES, please complete Schedule A and uttach,						
	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subnommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?						
	□ Yes □ No						
	If the answer to Number 9 above is YES, please complete Schedule B and ettach.						

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Signature of Lobbyist

Form BOL New, Map

Page 2 of ____